

PTO/SB/03 (08-03)
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**PLANT PATENT
 APPLICATION (35 U.S.C. 161)
 DECLARATION
 (37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing
 OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number 66261-044-7

First Named Inventor Harry J. SWARTZ

COMPLETE IF KNOWN

Application Number TBA

Filing Date August 19, 2003

Art Unit TBA

Examiner Name TBA

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) name below to be the original and first inventor(s) of the new and distinct variety of:

SWARTZ, Harry J.; FIOLA, Joseph A.; STILES, Herbert D.; and SMITH, Brian R.

plant named: RASPBERRY PLANT NAMED 'JACLYN'

which is claimed and for which a plant patent is sought, the specification of which

☒ is attached hereto OR ☐ was filed on (MM/DD/YYYY) as United States

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claim, as amended by any amendment specifically referred to above.

I have asexually reproduced the plant to which this application applies.

☐ Said plant was found in cultivated area (check this box for newly found plant only)

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only if Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 3)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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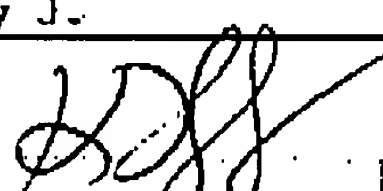
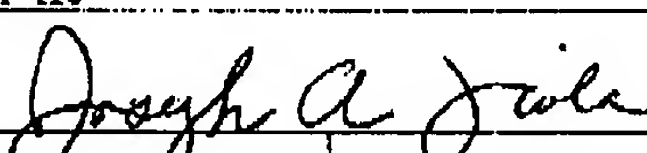
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DECLARATION - Plant Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 25269 OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
Address			
City		State	ZIP
Country	Telephone		Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Harry J.		Family Name or Surname SWARTZ	
Inventor's Signature 		Date 2/4/07	
Residence: City Laurel	State MD	Country USA	Citizenship
Mailing Address 16022 Jerald Road			
Mailing Address			
City Laurel	State MD	Zip 20707	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Joseph A.		Family Name or Surname FIOLA	
Inventor's Signature 		Date 1/28/09	
Residence: City Keedysville	State MD	Country USA	Citizenship
Mailing Address 5214 Hollow Tree Lane			
Mailing Address			
City Keedysville	State MD	Zip 21756	Country USA
<input type="checkbox"/> Additional inventors or legal representative(s) are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

PTO/ST/02A (08-03)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Page 3 of 3

THIRD			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Herbert D.		STILES	
Inventor's Signature <i>Herbert D. Stiles</i>		Date <u>2/1/04</u>	
Residence: City	Blackstone	State	VA
		Country	USA
Citizenship			
Mailing Address 811 Brunswick Avenue			
Mailing Address			
City	Blackstone	State	VA
		Zip	23824
		Country	USA
FOURTH			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Brian R.		SMITH	
Inventor's Signature <i>Brian R. Smith</i>		Date <u>1/30/04</u>	
Residence: City	River Falls	State	WI
		Country	USA
Citizenship			
Mailing Address 311 North Dallas Avenue			
Mailing Address			
City	River Falls	State	WI
		Zip	54022
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

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